MAXIMUS Federal Services

Case Number:	CM14-0113901		
Date Assigned:	08/04/2014	Date of Injury:	08/23/2013
Decision Date:	09/22/2014	UR Denial Date:	06/16/2014
Priority:	Standard	Application Received:	07/22/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The injured worker is a 52-year-old male who reported an injury on 08/23/2013; while using a pipe cleaner it kicked back and caused a laceration on his left wrist. The injured worker had an ulnar artery transection and ulnar nerve involvement. Diagnoses were status post repair of the left ulnar nerve, artery, and flexor digitorum profundus tendon of the small finger, repair of the partial laceration to the flexor digitorum of the small finger. Left wrist open fracture of the triquetrum, status post irrigation and debridement, and possible left carpal tunnel syndrome. Past treatments have been physical therapy. Diagnostic studies were a CAT scan of the head, x-rays, and EMG. Surgical history was left shoulder arthroscopic surgery and status post repair of the left ulnar nerve, artery, and laceration. Physical examination on 05/20/2014 revealed complaints of pain and tenderness in the left wrist and hand, with tenderness over the inside of the left wrist. The injured worker also complained of numbness over the left small and ring finger, and some numbness over the left middle finger. There was a report of weakness in the left hand. Examination of the elbow revealed normal range of motion. Special testing was a Tinel's test, which was negative. Range of motion for the left wrist to extension was 20 degrees, flexion was to 40 degrees, radial deviation was to 20 degrees, and ulnar deviation was to 15 degrees. There was tenderness over the left ulnar wrist, and over the dorsal aspect of the wrist. The Tinel's sign and Phalen's testing were slightly positive on the left. Medications were not reported. The treatment plan was for a pre-op medical clearance. The rationale and Request for Authorization were not submitted.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

Pre Op Medical Clearance: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 270.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Society of General Internal Medicine Online: http://www.choosingwisely.org/?=preoperative=surgical=clearance&submit.

Decision rationale: The request for Pre Op Medical Clearance is not medically necessary. According to the Society of General Internal Medicine, preoperative assessment is expected before all surgical procedures. This assessment includes an appropriately directed and sufficiently comprehensive history and physical examination, and, in some cases, properly includes laboratory and other testing to help direct management and assess surgical risk. However, preoperative testing for low risk surgical procedures result in unnecessary delays and adds to significant avoidable cost and should be eliminated. While the preoperative clearances are recommended for surgical procedures, the requested intervention is minimally invasive and a preoperative clearance is not necessary for minimally invasive procedures, and there is a lack of documentation of comorbidities to support the necessity for a preoperative clearance. The surgical procedure has not been approved. Therefore, the request for Pre Op Medical Clearance is not medically necessary.